

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of Texas

Case number (If known): _____ Chapter you are filing under:



Chapter 7



Chapter 11



Chapter 12



Chapter 13



Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

James

First name

Darrell

Middle name

Oneal

Last name

Suffix (Sr., Jr, II, III)

About Debtor 2 (Spouse Only in a Joint Case):

Melissa

First name

Pat

Middle name

Oneal

Last name

Suffix (Sr., Jr, II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

Melissa

First name

Pat

Middle name

Harris

Last name

Business name (if applicable)

Business name (if applicable)

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 0 2 1 0

OR

9xx - xx - _ _ _ _

xxx - xx - 5 8 8 2

OR

9xx - xx - _ _ _ _

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Your Employer Identification Number (EIN), if any.

EIN

EIN

EIN

EIN

5. Where you live

4308 Henderson Ave.

Number Street

North Richland Hills, TX 76180

City State ZIP Code

Tarrant

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing *this* district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408)

Debtor 1
Debtor 2

James
Melissa

First Name

Darrell
Pat

Middle Name

Oneal
Oneal

Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

8. How you will pay the fee

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No.

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No.

☐ Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

☒ No. Go to line 12.

☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☒ No. Go to Part 4.

☐ Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?



No.



Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1	James	Darrell	ONeal	Case number (if known) _____
Debtor 2	Melissa	Pat	ONeal	
	First Name	Middle Name	Last Name	

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.
- 16c.** State the type of debts you owe that are not consumer debts or business debts.
- _____

- 17. Are you filing under Chapter 7?** ☐ No. I am not filing under Chapter 7. Go to line 18.
☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No
☐ Yes
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

- 18. How many creditors do you estimate that you owe?**
- | | | | | |
|---|--|--|---|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 | <input type="checkbox"/> 50,000-100,000 | <input type="checkbox"/> More than 100,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | | | |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | | | |
| <input type="checkbox"/> 200-999 | | | | |

- 19. How much do you estimate your assets to be worth?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

- 20. How much do you estimate your liabilities to be?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ James Darrell Oneal

James Darrell Oneal, Debtor 1

Executed on 01/27/2025

MM/ DD/ YYYY

X /s/ Melissa Pat Oneal

Melissa Pat Oneal, Debtor 2

Executed on 01/27/2025

MM/ DD/ YYYY

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

**For your attorney, if you are
represented by one**

**If you are not represented by an
attorney, you do not need to file this
page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Marcus Leinart

Signature of Attorney for Debtor

Date **01/27/2025**

MM / DD / YYYY

Marcus Leinart

Printed name

Leinart Law Firm

Firm name

10670 N Central Expy Ste 320

Number Street

Dallas

City

TX

State

75231-2173

ZIP Code

Contact phone **(469) 232-3328**

Email address **contact@leinartlaw.com**

00794156

Bar number

TX

State

Fill in this information to identify your case and this filing:

Debtor 1	James	Darrell	ONeal
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Melissa	Pat	ONeal
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number _____			

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1 **Single Family Residence**

Street address, if available, or other description

4308 Henderson Ave.

**North Richland Hills, TX
76180**

City State ZIP Code

Tarrant

County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: **42853948**

Source of Value: **TCAD**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$307,972.00

Current value of the portion you own?
\$307,972.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☒ **Check if this is community property**
 (see instructions)

If you own or have more than one, list here:

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

1.2 **Westgate Resorts Las Vegas**

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☒ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$10,000.00

Current value of the portion you own?

\$10,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Timeshare

☒ **Check if this is community property** (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here**



\$317,972.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
☒ Yes

3.1 Make: **Jaguar**

Model: **F-Pace R-Sport**

Year: **2017**

Approximate mileage: **72358**

Other information:

VIN: SADCL2BV9HA077520

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$28,346.00

Current value of the portion you own?

\$28,346.00

If you own or have more than one, describe here:

3.2 Make: **Chevrolet**

Model: **Equinox**

Year: **2025**

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$47,320.00

Current value of the portion you own?

\$47,320.00

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

3.3 Make: Cadillac Who has an interest in the property? Check one.

Model: _____

Year: 2024

Approximate mileage: _____

Other information:

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.Current value of the entire property? \$66,000.00Current value of the portion you own? \$66,000.004. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories☒ No☐ Yes

4.1 Make: _____ Who has an interest in the property? Check one.

Model: _____

Year: _____

Other information:

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? _____

Current value of the portion you own? _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here _____ →

\$141,666.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.6. **Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe.See Attached.\$5,600.007. **Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.Misc. ElectronicsTelevisions\$1,400.00

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.**Clothes, Shoes, Accessories****\$700.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.**Jewelry****\$700.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☒ No☐ Yes. Describe.**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here****\$8,400.00****Part 4:** Describe Your Financial Assets

Debtor Oneal, James Darrell; Oneal, Melissa Pat

Case number (if known) _____

Do you own or have any legal or equitable interest in any of the following?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes Cash: _____**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes

Institution name:

Bank of America**Account Number: 2677**

17.1. Checking account:

\$853.14**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes Institution or issuer name:_____

_____**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☐ No☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Phoenix One (Property worth approximately \$15,000.00 but secured by \$25,000.00 SBA Loan)**100.00%****\$0.00****20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them.....

Issuer name:

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☒ No☐ Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: _____

Pension plan: _____

IRA: _____

Retirement account: _____

Keogh: _____

Additional account: _____

Additional account: _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes Institution name or individual:

Electric: _____

Gas: _____

Heating oil: _____

Security deposit on rental unit: _____

Prepaid rent: _____

Telephone: _____

Water: _____

Rented furniture: _____

Other: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes Issuer name and description:

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	_____
_____	_____
_____	_____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about them. ...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☐ No☒ Yes. Give specific information about them. ...**Body Comp Plus (medical program)****\$1.00****27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them. ...

Money or property owed to you?**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

☒ No☐ Yes. Give specific information.

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information.**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☒ No☐ Yes. Name the insurance company of each policy and list its value. ...

Company name: _____

Beneficiary: _____

Surrender or refund value: _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim.**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information.

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

**\$854.14**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe.

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
☐ Yes. Describe.

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe.

41. Inventory

- ☒ No
☐ Yes. Describe.

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe

Name of entity:

% of ownership:

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

43. Customer lists, mailing lists, or other compilations☒ No☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here****\$0.00****Part 6:****Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.****46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**☒ No. Go to Part 7.☐ Yes. Go to line 47.**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**47. Farm animals***Examples:* Livestock, poultry, farm-raised fish☒ No☐ Yes**48. Crops—either growing or harvested**☒ No☐ Yes. Give specific information.

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**☒ No☐ Yes50. **Farm and fishing supplies, chemicals, and feed**☒ No☐ Yes51. **Any farm- and commercial fishing-related property you did not already list**☒ No☐ Yes. Give specific information.52. **Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here****\$0.00****Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above53. **Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership☒ No☐ Yes. Give specific information.54. **Add the dollar value of all of your entries from Part 7. Write that number here****\$0.00****Part 8:** List the Totals of Each Part of this Form55. **Part 1: Total real estate, line 2****\$317,972.00**56. **Part 2: Total vehicles, line 5****\$141,666.00**57. **Part 3: Total personal and household items, line 15****\$8,400.00**58. **Part 4: Total financial assets, line 36****\$854.14**59. **Part 5: Total business-related property, line 45****\$0.00**60. **Part 6: Total farm- and fishing-related property, line 52****\$0.00**61. **Part 7: Total other property not listed, line 54****+****\$0.00**62. **Total personal property. Add lines 56 through 61.****\$150,920.14**

Copy personal property total

+ \$150,920.14

Debtor Oneal, James Darrell; Oneal, Melissa Pat

Case number (if known) _____

63. **Total of all property on Schedule A/B.** Add line 55 + line 62.

\$468,892.14

Debtor **Oneal, James Darrell; Oneal, Melissa Pat**

Case number (if known) _____

Continuation Page

6.	Household goods and furnishings	
	Bedroom Furniture/Decor	\$700.00
	Kitchen Items	\$700.00
	Kitchen/Dining Furniture/Decor	\$700.00
	Large Appliances	\$700.00
	Livingroom Furniture/Decor	\$700.00
	Misc. Household goods and furnishings	\$700.00
	Personal Tools/Lawn Equipment	\$700.00
	Small Appliances	\$700.00

Fill in this information to identify your case:

Debtor 1	James	Darrell	Oneal
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Melissa	Pat	Oneal
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: Single Family Residence 4308 Henderson Ave. North Richland Hills, TX 76180		\$307,972.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Line from <i>Schedule A/B</i> :	1.1			

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2025 Chevrolet Equinox</u> Line from Schedule A/B: <u>3.2</u>	<u>\$47,320.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</u>
Brief description: <u>2024 Cadillac</u> Line from Schedule A/B: <u>3.3</u>	<u>\$66,000.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</u>
Brief description: <u>Livingroom Furniture/Decor</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Bedroom Furniture/Decor</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Kitchen/Dining Furniture/Decor</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Kitchen Items</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Small Appliances</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>Large Appliances</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Personal Tools/Lawn Equipment</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Misc. Household goods and furnishings</u> Line from Schedule A/B: <u>6</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Televisions</u> Line from Schedule A/B: <u>7</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Misc. Electronics</u> Line from Schedule A/B: <u>7</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</u>
Brief description: <u>Clothes, Shoes, Accessories</u> Line from Schedule A/B: <u>11</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</u>
Brief description: <u>Jewelry</u> Line from Schedule A/B: <u>12</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)</u>

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Oneal, James Darrell**
Oneal, Melissa Pat

CASE NO
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real Estate	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$5,600.00	\$0.00	\$5,600.00	\$5,600.00	\$0.00
7.	Electronics	\$1,400.00	\$0.00	\$1,400.00	\$1,400.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$700.00	\$0.00	\$700.00	\$700.00	\$0.00
12.	Jewelry	\$700.00	\$0.00	\$700.00	\$700.00	\$0.00
13.	Nonfarm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$853.14	\$0.00	\$853.14	\$0.00	\$853.14
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Oneal, James Darrell**
Oneal, Melissa Pat

CASE NO
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
26.	Copyrights, trademarks, websites and other intellectual property	\$1.00	\$0.00	\$1.00	\$0.00	\$1.00
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: Oneal, James Darrell
Oneal, Melissa Pat

CASE NO
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$9,254.14	\$0.00	\$9,254.14	\$8,400.00	\$854.14

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: Oneal, James Darrell
Oneal, Melissa Pat

CASE NO
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
<u>Real Property</u>			
(None)			
<u>Personal Property</u>			
2017 Jaguar F-Pace R-Sport	\$28,346.00	\$28,346.00	\$0.00
TOTALS:	\$28,346.00	\$28,346.00	\$0.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<u>Real Property</u>				
(None)				
<u>Personal Property</u>				
Bank of America Checking account Acct. No.: 2677	\$853.14	\$0.00	\$853.14	\$853.14
Body Comp Plus (medical program)	\$1.00	\$0.00	\$1.00	\$1.00
TOTALS:	\$9,254.14	\$0.00	\$9,254.14	\$854.14

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

IN RE: **Oneal, James Darrell**
Oneal, Melissa Pat

CASE NO
CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #4

Summary	
A. Gross Property Value (not including surrendered property)	\$9,254.14
B. Gross Property Value of Surrendered Property	\$28,346.00
C. Total Gross Property Value (A+B)	\$37,600.14
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00
E. Gross Amount of Encumbrances on Surrendered Property	\$28,346.00
F. Total Gross Encumbrances (D+E)	\$28,346.00
G. Total Equity (not including surrendered property) / (A-D)	\$9,254.14
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$9,254.14
J. Total Exemptions Claimed	\$8,400.00
K. Total Non-Exempt Property Remaining (G-J)	\$854.14

Fill in this information to identify your case:

Debtor 1 **James** **Darrell** **Oneal**
 First Name Middle Name Last Name

Debtor 2 **Melissa** **Pat** **Oneal**
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Northern** District of **Texas**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.1	CIG Financial	Describe the property that secures the claim:	\$47,320.00	\$47,320.00	\$0.00
	Creditor's Name Attn: Bankruptcy	2025 Chevrolet Equinox			
	PO Box 19795	As of the date you file, the claim is: Check all that apply.			
	Number Street Irvine, CA 92623	<input type="checkbox"/> Contingent			
	City State ZIP Code	<input type="checkbox"/> Unliquidated			
	Who owes the debt? Check one.	<input type="checkbox"/> Disputed			
	<input type="checkbox"/> Debtor 1 only	Nature of lien. Check all that apply.			
	<input checked="" type="checkbox"/> Debtor 2 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Judgment lien from a lawsuit			
	<input type="checkbox"/> Check if this claim relates to a community debt	<input type="checkbox"/> Other (including a right to offset) _____			
	Date debt was incurred 12/1/2024	Last 4 digits of account number 5 8 9 5			
	Remarks: Pay Direct				

Add the dollar value of your entries in Column A on this page. Write that number here: **\$47,320.00**

Debtor 1 **James Darrell Oneal** Case number (if known) _____
 Debtor 2 **Melissa Pat Oneal**
 First Name Middle Name Last Name

Part 1: Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.2	GM Financial Creditor's Name 801 Cherry St Ste 3600 Number Street Fort Worth, TX 76102-6855 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: 2024 Cadillac As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number _____	\$66,000.00	\$66,000.00	\$0.00
2.3	NewRez Creditor's Name Attn: Bankruptcy PO Box 10826 Number Street Greenville, SC 29603-0826 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Single Family Residence 4308 Henderson Ave. North Richland Hills, TX 76180 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number _____	\$384,786.00	\$307,972.00	\$76,814.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$450,786.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:					

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.4	Texas Trust Credit Union Describe the property that secures the claim: <u>\$28,346.00</u> Creditor's Name <u>2017 Jaguar F-Pace R-Sport</u> Attn: Bankruptcy PO Box 2260 As of the date you file, the claim is: Check all that apply. Number Street <input type="checkbox"/> Contingent Mansfield, TX 76063-0047 <input type="checkbox"/> Unliquidated City State ZIP Code <input type="checkbox"/> Disputed Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only Nature of lien. Check all that apply. <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Check if this claim relates to a community debt <input type="checkbox"/> Other (including a right to offset) _____ Date debt was incurred <u>11/1/2022</u> Last 4 digits of account number <u>7 5 3 8</u> Remarks: Surrender Interest	<u>\$28,346.00</u>	<u>\$28,346.00</u>	<u>\$0.00</u>
2.5	Westgate Resorts Ltd Describe the property that secures the claim: <u>\$33,414.00</u> Creditor's Name <u>Westgate Resorts Las Vegas</u> Attn: Bankruptcy 5601 Windhover Dr. As of the date you file, the claim is: Check all that apply. Number Street <input type="checkbox"/> Contingent Orlando, FL 32819 <input type="checkbox"/> Unliquidated City State ZIP Code <input type="checkbox"/> Disputed Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only Nature of lien. Check all that apply. <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Check if this claim relates to a community debt <input type="checkbox"/> Other (including a right to offset) _____ Date debt was incurred <u>7/1/2024</u> Last 4 digits of account number <u>3 0 9 2</u> Remarks: Pay Direct	<u>\$33,414.00</u>	<u>\$10,000.00</u>	<u>\$23,414.00</u>
Add the dollar value of your entries in Column A on this page. Write that number here:		<u>\$61,760.00</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<u>\$559,866.00</u>		

Fill in this information to identify your case:

Debtor 1 **James** **Darrell** **Oneal**
 First Name Middle Name Last Name

Debtor 2 **Melissa** **Pat** **Oneal**
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Northern** District of **Texas**

Case number _____
 (if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Advanced Recovery Systems Nonpriority Creditor's Name PO Box 321472 Number Street Flowood, MS 39232 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 2 2 5 6 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Collecting for - PEAC Solutions	\$0.00

Debtor 1 James Darrell ONeal Case number (if known) _____
 Debtor 2 Melissa Pat ONeal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.2 <u>Affirm, Inc.</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy Attn: Bankruptcy</u> <u>650 California St , Fl 12</u> Number Street <u>San Francisco, CA 94108-2716</u> City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>O</u> <u>M</u> <u>T</u> <u>X</u> When was the debt incurred? <u>10/1/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	\$0.00
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4.3 <u>Amex</u> Nonpriority Creditor's Name <u>Correspondence/Bankruptcy</u> <u>PO Box 981535</u> Number Street <u>El Paso, TX 79998-1535</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0</u> <u>5</u> <u>3</u> <u>3</u> When was the debt incurred? <u>3/1/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$19,818.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4	Amex Nonpriority Creditor's Name Correspondence/Bankruptcy PO Box 981535 Number Street EI Paso, TX 79998-1535 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 4 0 3</u> When was the debt incurred? <u>12/1/2002</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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4.5	An/goodwin Nonpriority Creditor's Name 2425 North Central Expressway Ste. 500 Number Street Richardson, TX 75080 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 4 5 7</u> When was the debt incurred? <u>6/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Secured</u>	\$0.00
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Debtor 1 James Darrell ONeal Case number (if known) _____
 Debtor 2 Melissa Pat ONeal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Bank of America Nonpriority Creditor's Name Attn: Bankruptcy 4909 Savarese Circle Number Street Tampa, FL 33634 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 8 1 4</u> When was the debt incurred? <u>12/1/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$19,493.00
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4.7	Bank of America Nonpriority Creditor's Name Attn: Bankruptcy NC4-105-03-14 POB 26012 Number Street Greensboro, NC 27410 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 0 9 4</u> When was the debt incurred? <u>11/1/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	Bank of America Nonpriority Creditor's Name Attn: Bankruptcy 4909 Savarese Circle Number Street Tampa, FL 33634 City State ZIP Code	Last 4 digits of account number <u>4 7 3 0</u> When was the debt incurred? <u>12/5/2013</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.9	Bank Of America Nonpriority Creditor's Name Attn: Bankruptcy 100 North Tryon St Number Street Charlotte, NC 28255 City State ZIP Code	Last 4 digits of account number <u>8 2 0 0</u> When was the debt incurred? <u>11/1/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditLineSecured</u>	\$179,390.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	Barclays Bank Delaware Nonpriority Creditor's Name Attn: Bankruptcy PO Box 8801 Number Street Wilmington, DE 19899-8801 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8 4 8 6</u> When was the debt incurred? <u>7/1/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$7,444.00
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4.11	Caine & Weiner Nonpriority Creditor's Name Attn: Bankruptcy 5805 Sepulveda Blvd 4th Floor Number Street Sherman Oaks, CA 91411 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7 1 8 5</u> When was the debt incurred? <u>1/1/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Original Creditor: PROGRESSIVE</u>	\$251.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.12	Capital One Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285 Number Street Salt Lake City, UT 84130-0285 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1</u> <u>0</u> <u>1</u> <u>7</u> When was the debt incurred? <u>10/1/2002</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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4.13	Capital One Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285 Number Street Salt Lake City, UT 84130-0285 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7</u> <u>0</u> <u>5</u> <u>7</u> When was the debt incurred? <u>3/14/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14	Cenlar Nonpriority Creditor's Name Attn: Centralized Bankruptcy 425 Phillips Blvd. Number Street Ewing, NH 08618 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 7 7 7</u> When was the debt incurred? <u>8/29/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>VeteransAdministrationRealEstateMortgage</u>	\$0.00
4.15	Cenlar Nonpriority Creditor's Name Attn: Centralized Bankruptcy 425 Phillips Blvd. Number Street Ewing, NH 08618 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5 1 2 6</u> When was the debt incurred? <u>11/1/2001</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Mortgage</u>	\$0.00

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16	Century Law Firm Nonpriority Creditor's Name <u>301 W. Bay St. Ste. 1465</u> Number Street <u>Jacksonville, FL 32202</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Agency</u>	\$0.00
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4.17	Chase Auto Finance Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>700 Kansas Lane LA</u> Number Street <u>Monroe, LA 71203</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 3 0 1</u> When was the debt incurred? <u>2/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.18	Citibank/Sears Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040 Number Street St Louis, MO 63179-0040 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8 9 6 2</u> When was the debt incurred? <u>9/1/2009</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$0.00
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4.19	Citibank/The Home Depot Nonpriority Creditor's Name Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790040 Number Street St Louis, MO 63179-0040 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 2 1 4</u> When was the debt incurred? <u>6/1/2012</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	Click n' Close	Last 4 digits of account number	<u>2 2 0 1</u>	\$0.00
Nonpriority Creditor's Name		When was the debt incurred?		
<u>15301 Spectrum Drive #405</u>		<u>11/22/2013</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
<u>Addison, TX 75001</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City State ZIP Code		Type of NONPRIORITY unsecured claim:		
Who incurred the debt? Check one.		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>VeteransAdministrationRealEstateMortgage</u>		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

4.21	Collection Management Company	Last 4 digits of account number	<u>5 5 8 5</u>	\$1,105.00
Nonpriority Creditor's Name		When was the debt incurred?		
<u>Attn: Bankruptcy Attn: Bankruptcy</u>		<u>2/1/2019</u>		
<u>661 Andersen Drive , Suite 110</u>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<u>Pittsburgh, PA 15220</u>		Type of NONPRIORITY unsecured claim:		
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Original Creditor: MEDSTAR MOBILE HEALTHCARE</u>		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.22	Comenity Bank/Bealls Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 5 0 2</u> When was the debt incurred? <u>3/1/1999</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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4.23	Comenity Bank/Justice Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5 2 8 6</u> When was the debt incurred? <u>4/6/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.		Total claim
4.24	Comenity Bank/Overstock Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 7 4 4</u> When was the debt incurred? <u>7/10/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
4.25	Comenity Capital Bank/HSN Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8 2 6 5</u> When was the debt incurred? <u>2/1/2011</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26 Comenity Capital/Davids Bridal Last 4 digits of account number 5 7 9 1 **\$2.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 11/1/2021

PO Box 182125

Number Street

As of the date you file, the claim is: Check all that apply.

Columbus, OH 43218

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify ChargeAccount

Is the claim subject to offset?

- ☒ No
☐ Yes

4.27 Comenitybank/New York Last 4 digits of account number 2 0 1 4 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 12/1/2017

PO Box 182125

Number Street

As of the date you file, the claim is: Check all that apply.

Columbus, OH 43218

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify ChargeAccount

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.28	ComenityBank/Venus Nonpriority Creditor's Name Attn: Bankruptcy PO Box 182125 Number Street Columbus, OH 43218 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1</u> <u>6</u> <u>5</u> <u>2</u> When was the debt incurred? <u>10/23/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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4.29	Costco Business Citi Nonpriority Creditor's Name PO Box 78019 Number Street Phoenix, AZ 85062 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2</u> <u>2</u> <u>4</u> <u>5</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$2,482.98
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.30	Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3025 Number Street New Albany, OH 43054 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 5 3 3</u> When was the debt incurred? <u>9/1/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$8,532.00
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4.31	EECU Nonpriority Creditor's Name Attn: Bankruptcy PO Box 1777 Number Street Fort Worth, TX 76101 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 0 0 1</u> When was the debt incurred? <u>12/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
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Debtor 1 James Darrell ONeal Case number (if known) _____
 Debtor 2 Melissa Pat ONeal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.32	Fifth Gear Argyle Nonpriority Creditor's Name <u>8955 US 377</u> Number Street <u>Argyle, TX 76226</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 0 7 8</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Services</u>	\$24,353.90
4.33	Flagship Credit Acceptance Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 965</u> Number Street <u>Chadds Ford, PA 19317</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 0 0 1</u> When was the debt incurred? <u>9/1/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.34	Fst Premier Nonpriority Creditor's Name <u>3820 N Louise Ave</u> Number Street <u>Sioux Falls, SD 57107</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5 4 0 4</u> When was the debt incurred? <u>10/1/2006</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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4.35	GM Financial Nonpriority Creditor's Name <u>801 Cherry Street, Ste. 3600</u> Number Street <u>Fort Worth, TX 76102</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 0 6 7</u> When was the debt incurred? <u>1/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
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Debtor 1 James Darrell ONeal Case number (if known) _____
 Debtor 2 Melissa Pat ONeal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.36	GM Financial Nonpriority Creditor's Name <u>801 Cherry Street, Ste. 3600</u> Number Street <u>Fort Worth, TX 76102</u> City State ZIP Code	Last 4 digits of account number <u>2 8 5 0</u> When was the debt incurred? <u>5/1/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Lease</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.37	GM Financial Nonpriority Creditor's Name <u>801 Cherry Street, Ste. 3600</u> Number Street <u>Fort Worth, TX 76102</u> City State ZIP Code	Last 4 digits of account number <u>2 9 4 9</u> When was the debt incurred? <u>6/1/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.38	GM Financial Nonpriority Creditor's Name <u>801 Cherry Street, Ste. 3600</u> Number Street <u>Fort Worth, TX 76102</u> City State ZIP Code	Last 4 digits of account number <u>1 2 1 8</u> When was the debt incurred? <u>9/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Lease</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.39	GM Financial Nonpriority Creditor's Name <u>801 Cherry Street, Ste. 3600</u> Number Street <u>Fort Worth, TX 76102</u> City State ZIP Code	Last 4 digits of account number <u>7 0 2 5</u> When was the debt incurred? <u>1/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.40	Greensky Llc Nonpriority Creditor's Name Attn: Bankruptcy Attn: Bankruptcy 5565 Glenridge Connector , Ste 800 Number Street Atlanta, GA 30341-4796 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0</u> <u>3</u> <u>1</u> <u>3</u> When was the debt incurred? <u>5/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	\$0.00
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4.41	Harris & Harris Nonpriority Creditor's Name 111 W Jackson Blvd Suite 400 Number Street Chicago, IL 60604 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4</u> <u>7</u> <u>2</u> <u>8</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - NTTA</u>	\$505.72
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.42	Jpmcb Nonpriority Creditor's Name MailCode LA4-7100 700 Kansas Lane Number Street Monroe, LA 71203 City State ZIP Code	Last 4 digits of account number <u>8 2 1 3</u> When was the debt incurred? <u>11/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$264.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.43	Kinecta Federal Credit Union Nonpriority Creditor's Name Attn: Bankruptcy Dept P.O. Box 10003 Number Street Manhattan Beach, CA 90266 City State ZIP Code	Last 4 digits of account number <u>0 0 0 1</u> When was the debt incurred? <u>5/1/2012</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.44	Kinecta Federal Credit Union Nonpriority Creditor's Name Attn: Bankruptcy PO Box 10003 Number Street Manhattan Beach, CA 90266 City State ZIP Code	Last 4 digits of account number <u>1 9 1 8</u> When was the debt incurred? <u>10/1/2012</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.45	Kohl's Nonpriority Creditor's Name Attn: Credit Administrator PO Box 3043 Number Street Milwaukee, WI 53201-3043 City State ZIP Code	Last 4 digits of account number <u>6 8 4 6</u> When was the debt incurred? <u>10/1/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.46	LoanCare Llc Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <hr/> Number Street <u>PO Box 8068, VA 23452</u> City State ZIP Code	Last 4 digits of account number <u>7 6 6 4</u> When was the debt incurred? <u>11/1/2013</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ConventionalRealEstateMortgage</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.47	LVNV/Resurgent Capital Services Nonpriority Creditor's Name <u>PO Box 10587</u> Number Street <hr/> <u>Greenville, SC 29603-0587</u> City State ZIP Code	Last 4 digits of account number <u>9 3 5 3</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for - Synchrony/PayPal</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.48	Macy's/ DSNB Nonpriority Creditor's Name <u>Atytn: Bankruptcy 701 E. 60th Street North</u> Number Street <u>Sioux Falls, SD 57104</u> City State ZIP Code	Last 4 digits of account number <u>6 9 0 5</u> When was the debt incurred? <u>12/15/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.49	Macy's/ DSNB Nonpriority Creditor's Name <u>Atytn: Bankruptcy 701 E. 60th Street North</u> Number Street <u>Sioux Falls, SD 57104</u> City State ZIP Code	Last 4 digits of account number <u>8 4 9 1</u> When was the debt incurred? <u>10/10/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.50	<u>Mrc/united Wholesale M</u>	Last 4 digits of account number	<u>2</u> <u>5</u> <u>3</u> <u>0</u>	<u>\$0.00</u>
	Nonpriority Creditor's Name			
	<u>Attn: Bankruptcy</u>	When was the debt incurred?	<u>8/1/2014</u>	
	<u>P. O. Box 619098</u>	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	<u>Dallas, TX 75261-9741</u>	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only			
	<input type="checkbox"/> Debtor 2 only			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

4.51	<u>NAVY FCU</u>	Last 4 digits of account number	<u>8</u> <u>4</u> <u>3</u> <u>5</u>	<u>\$0.00</u>
	Nonpriority Creditor's Name			
	<u>Attn: Bankruptcy</u>	When was the debt incurred?	<u>6/1/2020</u>	
	<u>PO Box 3000</u>	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	<u>Merrifield, VA 22119-3000</u>	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			
	<input checked="" type="checkbox"/> Debtor 1 only			
	<input type="checkbox"/> Debtor 2 only			
	<input type="checkbox"/> Debtor 1 and Debtor 2 only			
	<input type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.52	NAVY FCU Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3000 Number Street Merrifield, VA 22119-3000 City State ZIP Code	Last 4 digits of account number <u>2 6 6 1</u> When was the debt incurred? <u>8/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$0.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>			

4.53	NAVY FCU Nonpriority Creditor's Name Attn: Bankruptcy PO Box 3000 Number Street Merrifield, VA 22119-3000 City State ZIP Code	Last 4 digits of account number <u>4 8 8 6</u> When was the debt incurred? <u>10/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$0.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.54	Nebraska Furniture Mart Nonpriority Creditor's Name Attn: Collections PO Box 2335 Number Street Omaha, NE 68103 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 R E V</u> When was the debt incurred? <u>3/1/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$5,888.00
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4.55	NewRez Nonpriority Creditor's Name Attn: Research/Bankruptcy PO Box 5452 Number Street Mount Laurel, NJ 08054-5452 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.56	NTTA Nonpriority Creditor's Name <u>PO Box 660244</u> Number Street <u>Dallas, TX 75266-0244</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9</u> <u>1</u> <u>5</u> <u>3</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Tolls</u>	\$2,375.76
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4.57	PEAC Solutions Nonpriority Creditor's Name <u>c/o Karen Shields, Esquire</u> <u>300 Fellowship Road</u> Number Street <u>Mount Laurel, NJ 08054</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8</u> <u>0</u> <u>0</u> <u>2</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>	\$48,849.92
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.58	Planet Home Lending, L Nonpriority Creditor's Name 10 Research Pkwy Number Street Wallingford, CT 06492 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$0.00
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4.59	Progressive County Mutual Insurance Nonpriority Creditor's Name 16955 Space Center Blvd Number Street Houston, TX 77062 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Services</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.60 Santander Consumer USA, Inc Last 4 digits of account number 1 0 0 0 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 6/1/2015

PO Box 961245

Number Street

As of the date you file, the claim is: Check all that apply.

Fort Worth, TX 76161-1245

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Automobile

Is the claim subject to offset?

- ☒ No
☐ Yes

4.61 Seventh Ave/Swiss Colony Inc. Last 4 digits of account number 6 5 7 0 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 2/1/2013

1112 7th Ave

Number Street

As of the date you file, the claim is: Check all that apply.

Monroe, WI 53566

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify ChargeAccount

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.62	Small Business Administration Nonpriority Creditor's Name <u>409 3rd St. SW</u> Number Street <u>Washington, DC 20416</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$25,000.00
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4.63	Sunbit Financial Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>10880 Wilshire Blv Suite 870</u> Number Street <u>Los Angeles, CA 90024</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9</u> <u>4</u> <u>4</u> <u>4</u> When was the debt incurred? <u>11/21/2024</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>InstallmentSalesContract</u>	\$969.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.64	Syncb/At Home CC Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 4 9 7</u> When was the debt incurred? <u>10/5/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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4.65	Syncb/Rooms To Go Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>9 8 5 8</u> When was the debt incurred? <u>3/4/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.66 Syncb/Rooms To Go Last 4 digits of account number 1 9 4 8 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 5/25/2016

PO Box 965060

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Orlando, FL 32896-5060

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only

☐ Student loans

☐ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No

☐ Yes

4.67 Syncb/Walmart Last 4 digits of account number 3 7 2 6 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 11/1/2016

PO Box 965060

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Orlando, FL 32896-5060

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☐ Debtor 1 only

☐ Student loans

☒ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.68	Synchrony Bank Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 7 2 2</u> When was the debt incurred? <u>4/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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4.69	Synchrony Bank Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 9 7 8</u> When was the debt incurred? <u>9/17/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.70	Synchrony Bank/Care Credit Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2 9 7 6</u> When was the debt incurred? <u>12/30/2010</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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4.71	Synchrony Bank/Care Credit Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8 8 0 2</u> When was the debt incurred? <u>2/1/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.72	Synchrony Bank/Lowes Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896 City State ZIP Code	Last 4 digits of account number <u>4 5 0 6</u> When was the debt incurred? <u>3/5/2007</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.73	Synchrony Bank/Men's Wearhouse Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code	Last 4 digits of account number <u>7 2 1 2</u> When was the debt incurred? <u>1/1/2014</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.74	Synchrony Bank/Sams Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 9 5 7</u> When was the debt incurred? <u>3/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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4.75	Synchrony/Ashley Furniture Homestore Nonpriority Creditor's Name Attn: Bankruptcy PO Box 965060 Number Street Orlando, FL 32896-5060 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>0 0 9 6</u> When was the debt incurred? <u>5/23/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.76 Synchrony/PayPal Credit Last 4 digits of account number 0 6 9 8 **\$2,536.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 4/1/2013

PO Box 965064

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Orlando, FL 32896-5064

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☐ Debtor 1 only

☐ Student loans

☒ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No

☐ Yes

4.77 Synchrony/PayPal Credit Last 4 digits of account number 3 8 9 3 **\$2,121.25**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 7/1/2021

PO Box 965064

As of the date you file, the claim is: Check all that apply.

Number Street

☐ Contingent

Orlando, FL 32896-5064

☐ Unliquidated

City State ZIP Code

☐ Disputed

Who incurred the debt? Check one.

Type of NONPRIORITY unsecured claim:

☒ Debtor 1 only

☐ Student loans

☐ Debtor 2 only

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debtor 1 and Debtor 2 only

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No

☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.78 TD Auto Finance Last 4 digits of account number 0 6 7 6 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 5/1/2019

PO Box 9223

Number Street

As of the date you file, the claim is: Check all that apply.

Farmington Hills, MI 48333-9223

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Automobile

Is the claim subject to offset?

- ☒ No
☐ Yes

4.79 TD Bank Last 4 digits of account number 1 3 3 5 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy/TD Card Srvs

When was the debt incurred? 11/1/2022

PO Box 84037

Number Street

As of the date you file, the claim is: Check all that apply.

Columbus, GA 31908-4037

City State ZIP Code

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify ChargeAccount

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.80 Together Credit Union Last 4 digits of account number 0 6 0 1 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 10/1/2013

423 Lynch St.

Number Street

St. Louis, MO 63118

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Automobile

Is the claim subject to offset?

- ☒ No
☐ Yes

4.81 Toyota Financial Services Last 4 digits of account number 0 0 0 1 **\$0.00**

Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred? 2/1/2014

PO Box 259004

Number Street

Plano, TX 75025-9001

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Automobile

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.82	Trajector Medical Nonpriority Creditor's Name <u>5950 NW 1st Place Ste. 200</u> Number Street <u>Gainesville, FL 32607</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Services</u>	\$4,440.10
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4.83	Us Bk Cacs Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 5229</u> Number Street <u>Cincinnati, OH 45201-5229</u> City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1 8 0 8</u> When was the debt incurred? <u>4/1/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	\$0.00
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Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.84	USAA Federal Savings Bank Nonpriority Creditor's Name Attn: Bankruptcy 9800 Fredericksburg Rd Number Street San Antonio, TX 78288 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8 0 2 8</u> When was the debt incurred? <u>5/1/2019</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	<u>\$244.93</u>
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4.85	USAA Federal Savings Bank Nonpriority Creditor's Name Attn: Bankruptcy 9800 Fredericksburg Road Number Street San Antonio, TX 78288 City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4 6 1 7</u> When was the debt incurred? <u>3/1/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	<u>\$0.00</u>
------	---	---	---------------

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.86	UT Southwestern Medical Nonpriority Creditor's Name <u>PO Box 845347</u> Number Street <u>Dallas, TX 75284-5347</u> City State ZIP Code	Last 4 digits of account number <u>5 7 2 4</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>	\$7,596.36
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.87	Village Capital & Investments, Llc Nonpriority Creditor's Name <u>Attn: Bankruptcy Attn: Bankruptcy</u> <u>2550 Paseo Verde Parkway , Suite 100</u> Number Street <u>Henderson, NV 89074</u> City State ZIP Code	Last 4 digits of account number <u>8 7 7 2</u> When was the debt incurred? <u>7/1/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>VeteransAdministrationRealEstateMortgage</u>	(\$1.00)
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.88	Wells Fargo Bank NA Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus MAC X2303-01A 3rd Floor Number Street Des Moines, IA 50328 City State ZIP Code	Last 4 digits of account number <u>5 7 8 9</u> When was the debt incurred? <u>10/1/2013</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	<u>\$3,590.87</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.89	Wells Fargo Bank, NA Nonpriority Creditor's Name Attn: Bankruptcy 1 Home Campus MAC X2303-01A 3rd Floor Number Street Des Moines, IA 50328 City State ZIP Code	Last 4 digits of account number <u>0 0 0 1</u> When was the debt incurred? <u>3/1/2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>NoteLoan</u>	<u>\$0.00</u>
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 James Darrell Oneal Case number (if known) _____
 Debtor 2 Melissa Pat Oneal
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.90	Wells Fargo Jewelry Advantage Nonpriority Creditor's Name Attn: Bankruptcy POB 10438 MAC F8235-02F Number Street Des Moines, IA 50306 City State ZIP Code	Last 4 digits of account number <u>5 0 5 7</u> When was the debt incurred? <u>3/4/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

4.91	Wells Fargo Jewelry Advantage Nonpriority Creditor's Name Attn: Bankruptcy POB 10438 MAC F8235-02F Number Street Des Moines, IA 50306 City State ZIP Code	Last 4 digits of account number <u>0 7 5 5</u> When was the debt incurred? <u>3/2/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>	\$0.00
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1	James	Darrell	Oneal	Case number (if known) _____
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a. Domestic support obligations	6a.		\$0.00
	6b. Taxes and certain other debts you owe the government	6b.		\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.		\$0.00
				Total claim
Total claims from Part 2	6f. Student loans	6f.		\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$367,252.79
	6j. Total. Add lines 6f through 6i.	6j.		\$367,252.79

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Marlin Leasing dba PEAC Solutions</u> Name <u>300 Fellowship Road</u> Number Street <u>Mount Laurel, NJ 08054</u> City State ZIP Code	Office Space Contract to be REJECTED
2.2	 Name Number Street City State ZIP Code	
2.3	 Name Number Street City State ZIP Code	
2.4	 Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	James	Darrell	Oneal
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Melissa	Pat	Oneal
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.
Oneal, Melissa Pat

Name of your spouse, former spouse, or legal equivalent

4308 Henderson Ave.

Number Street

North Richland Hills, TX 76180

City State ZIP Code

☒ Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.
Oneal, James Darrell

Name of your spouse, former spouse, or legal equivalent

4308 Henderson Ave.

Number Street

North Richland Hills, TX 76180

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

☐ Schedule D, line _____

Number Street

☐ Schedule E/F, line _____

City State ZIP Code

☐ Schedule G, line _____

Debtor 1 James Darrell Oneal Case number (if known) _____
Debtor 2 Melissa Pat Oneal
First Name Middle Name Last Name

Additional Page to List More Codebtors

Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.2	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	<div><input type="checkbox"/> Schedule D, line _____</div> <div><input type="checkbox"/> Schedule E/F, line _____</div> <div><input type="checkbox"/> Schedule G, line _____</div>

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there? 6 Yrs

Debtor 1

Debtor 2 or non-filing spouse

☒ Employed ☐ Not Employed

☒ Employed ☐ Not Employed

Owner

Self Employed

Phoenix One Health Solution

Realtor

1701 N. Northwest Hwy Ste. 100

Number Street

Number Street

Grapevine, TX 76051

City

State

Zip Code

City

State

Zip Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

2.

\$0.00

\$0.00

3. **Estimate and list monthly overtime pay.**

3.

+ \$0.00

+ \$0.00

4. **Calculate gross income.** Add line 2 + line 3.

4.

\$0.00

\$0.00

Debtor 1
Debtor 2James
MelissaDarrell
PatOneal
Oneal

First Name

Middle Name

Last Name

Case number (if known) _____

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$0.00	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$0.00	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$2,366.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: <u>See additional page</u>	8h. +	\$4,061.22	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$4,061.22	\$2,366.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$4,061.22	\$2,366.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____	11. +		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.		\$6,427.22
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Debtor 1	James	Darrell	Oneal	Case number (if known) _____
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

			Amount
8h. Other monthly income For Debtor 1			
<u>VA Disability Income</u>			<u>\$995.22</u>
<u>US Personnel Mgmt-Retirement</u>			<u>\$2,466.00</u>
<u>New Self-Employment Income</u>			<u>\$600.00</u>

Debtor 1	James	Darrell	Oneal	Case number (if known) _____
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

8a. Attached Statement

Real Estate Agent

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u>\$2,366.00</u>
--------------------------	--------------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts

TOTAL PAYMENTS TO SECURED CREDITORS	<u>\$0.00</u>
-------------------------------------	----------------------

3. Other Expenses

TOTAL OTHER EXPENSES	<u>\$0.00</u>
----------------------	----------------------

4. TOTAL MONTHLY EXPENSES(Add item 2 - 21)

<u>\$0.00</u>

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)	<u>\$2,366.00</u>
---	--------------------------

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☒ No

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

☐ No. ☐ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$3,368.72

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$100.00

4d. Homeowner's association or condominium dues

4d. \$0.00

Debtor 1
Debtor 2

**James
Melissa**

**Darrell
Pat**

**Oneal
Oneal**

First Name

Middle Name

Last Name

Case number (if known) _____

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$200.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$75.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$91.00</u>
6d.	Other. Specify: _____	6d. <u>\$0.00</u>
7.	Food and housekeeping supplies	7. <u>\$400.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$25.00</u>
10.	Personal care products and services	10. <u>\$50.00</u>
11.	Medical and dental expenses	11. <u>\$100.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$125.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$0.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$0.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 <u>2025 Chevrolet Equinox</u>	17a. <u>\$790.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

21. **Other.** Specify: Office Lease Space

21. + \$1,100.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$6,424.72

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$6,424.72

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$6,427.22

23b. Copy your monthly expenses from line 22c above.

23b. - \$6,424.72

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$2.50

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$317,972.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$150,920.14</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$468,892.14</u>

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$559,866.00</u>
---	---------------------

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>+ \$367,252.79</u>

Your total liabilities

\$927,118.79

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$6,427.22</u>
---	-------------------

5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$6,424.72</u>
---	-------------------

Debtor 1	James	Darrell	Oneal	Case number (if known) _____
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$2,860.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	<u> \$0.00 </u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u> \$0.00 </u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u> \$0.00 </u>
9d. Student loans. (Copy line 6f.)	<u> \$0.00 </u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u> \$0.00 </u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u> \$0.00 </u>
9g. Total. Add lines 9a through 9f.	<div style="border: 1px solid black; padding: 5px; display: inline-block;"><u> \$0.00 </u></div>

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ James Darrell Oneal
James Darrell Oneal, Debtor 1

X /s/ Melissa Pat Oneal
Melissa Pat Oneal, Debtor 2

Date 01/27/2025
MM/ DD/ YYYY

Date 01/27/2025
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
- ☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____ City State ZIP Code		_____ City State ZIP Code	
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
_____ Number Street	From _____ To _____	_____ Number Street	From _____ To _____
_____ City State ZIP Code		_____ City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
- ☒ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Debtor 1	James	Darrell	Oneal	
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income <small>Check all that apply.</small>	Sources of income <small>Check all that apply.</small>
	Gross Income <small>(before deductions and exclusions)</small>	Gross Income <small>(before deductions and exclusions)</small>
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, <u>2024</u>) <small>YYYY</small>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2023</u>) <small>YYYY</small>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	<u>\$243,833.00</u>	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income <small>Describe below.</small>	Sources of income <small>Describe below.</small>
	Gross income from each source <small>(before deductions and exclusions)</small>	Gross Income from each source <small>(before deductions and exclusions)</small>
From January 1 of current year until the date you filed for bankruptcy:	VA Benefits <hr/> Pensions/Retirement <hr/>	<hr/> <hr/>
	<u>\$995.22</u> <u>\$2,466.00</u>	
For last calendar year: (January 1 to December 31, <u>2024</u>) <small>YYYY</small>	VA Benefits <hr/> Pensions/Retirement <hr/>	<hr/> <hr/>
	<u>\$11,942.64</u> <u>\$29,592.00</u>	
For the calendar year before that: (January 1 to December 31, <u>2023</u>) <small>YYYY</small>	Social Security Benefits <hr/> Tax Refund <hr/> VA Benefits <hr/>	<hr/> <hr/> <hr/>
	<u>\$32,244.00</u> <u>\$20,351.00</u> <u>\$11,942.64</u>	

Debtor 1
Debtor 2

**James
Melissa**

**Darrell
Pat**

**Oneal
Oneal**

First Name

Middle Name

Last Name

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Westgate Resorts Ltd <small>Creditor's Name</small> Attn: Bankruptcy 5601 Windhover Dr. <small>Number Street</small> Orlando, FL 32819 <small>City State ZIP Code</small>	last 90 days	\$1,890.00	\$33,414.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other Timeshare
CIG Financial <small>Creditor's Name</small> Attn: Bankruptcy PO Box 19795 <small>Number Street</small> Irvine, CA 92623 <small>City State ZIP Code</small>	last 90 days	\$2,370.00	\$47,320.00	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Newrez <small>Creditor's Name</small> Attn: Bankruptcy PO Box 10826 <small>Number Street</small> Greenville, SC 29603-0826 <small>City State ZIP Code</small>	01/01/2025 12/01/2024 11/01/2024	\$10,106.16	\$384,786.00	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Debtor 1	James	Darrell	Oneal	
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No

☐ Yes. Fill in the details.

Debtor 1 **James** **Darrell** **Oneal**
 Debtor 2 **Melissa** **Pat** **Oneal**
 First Name Middle Name Last Name Case number (if known) _____

	Nature of the case	Court or agency	Status of the case
Case title _____ _____			<input type="checkbox"/> Pending
Case number _____		Court Name _____	<input type="checkbox"/> On appeal
		Number _____ Street _____	<input type="checkbox"/> Concluded
		City _____ State _____ ZIP Code _____	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
 Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name _____ _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____			
	Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name _____ _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____			
Last 4 digits of account number: XXXX- _ _ _ _			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Debtor 1 **James** **Darrell** **Oneal**
 Debtor 2 **Melissa** **Pat** **Oneal**
 First Name Middle Name Last Name

Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name Number Street City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Debtor 1	James	Darrell	Oneal	Case number (if known) _____
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

Leinart Law Firm

Person Who Was Paid

10670 N Central Expy Ste 320

Number Street

Dallas, TX 75231-2173

City State ZIP Code

contact@leinartlaw.com

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Attorney's Fee	1/22/2025	\$82.00

DECAF

Person Who Was Paid

112 Goliad St.

Number Street

Fort Worth, TX 76126-2009

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Credit/Debtor Counseling	01/21/2025	\$30.00

Debtor 1 **James** **Darrell** **Oneal**
 Debtor 2 **Melissa** **Pat** **Oneal**
 First Name Middle Name Last Name

Case number (if known) _____

Credit Infonet

Person Who Was Paid

4540 Honeywell Court

Number Street

Dayton, OH 45424

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
---	-----------------------------------	-------------------

Credit report

01/21/2025

\$75.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

☒ No

☐ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid		
Number Street		
City State ZIP Code		

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☒ No

☐ Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		
Number Street		
City State ZIP Code		
Person's relationship to you _____		

Debtor 1	James	Darrell	Oneal	
Debtor 2	Melissa	Pat	Oneal	
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	

Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?
(These are often called *asset-protection devices*.)

- ☒ No
- ☐ Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
<div style="display: flex;"> <div style="width: 25%; border-right: 1px solid black; padding-right: 5px;"> Name of trust _____ </div> <div style="width: 75%;"></div> </div>	

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
- ☐ Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
<div style="display: flex;"> <div style="width: 30%; border-right: 1px solid black; padding-right: 5px;"> Name of Financial Institution _____ Number Street City State ZIP Code </div> <div style="width: 70%; padding-left: 5px;"> <div style="display: flex; justify-content: space-between;"> XXXX- ____ - ____ - ____ <div style="width: 60%;"> <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____ </div> </div> </div> </div>			

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
- ☐ Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
<div style="display: flex;"> <div style="width: 30%; border-right: 1px solid black; padding-right: 5px;"> Name of Financial Institution _____ Number Street City State ZIP Code </div> <div style="width: 70%; padding-left: 5px;"> Name _____ Number Street City State ZIP Code </div> </div>		<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1	James	Darrell	Oneal	
Debtor 2	Melissa	Pat	Oneal	
	First Name	Middle Name	Last Name	Case number (if known) _____

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
- ☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of Storage Facility</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div>

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
- ☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Owner's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City State ZIP Code</div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div>

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
- ☐ Yes. Fill in the details.

Debtor 1
Debtor 2

**James
Melissa**

**Darrell
Pat**

**Oneal
Oneal**

First Name

Middle Name

Last Name

Case number (if known) _____

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

25. Have you notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Fill in the details.

Court or agency

Nature of the case

Status of the case

Case title

Court Name

☐ Pending

☐ On appeal

☐ Concluded

Number Street

Case number

City

State

ZIP Code

Debtor 1	James	Darrell	Oneal
Debtor 2	Melissa	Pat	Oneal
	First Name	Middle Name	Last Name

Case number (if known) _____

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Phoenix One Health Solution

Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: _____

1701 N. Northwest Hwy Ste. 100

Number Street

Name of accountant or bookkeeper

Dates business existed

From **6/2018** To _____

Grapevine, TX 76051

City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City

State

ZIP Code

Debtor 1
Debtor 2

**James
Melissa**
First Name

**Darrell
Pat**
Middle Name

**Oneal
Oneal**
Last Name

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ James Darrell Oneal
Signature of James Darrell Oneal, Debtor 1

X /s/ Melissa Pat Oneal
Signature of Melissa Pat Oneal, Debtor 2

Date 01/27/2025

Date 01/27/2025

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	James	Darrell	ONeal
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Melissa	Pat	ONeal
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Northern District of Texas		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: CIG Financial	<input type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt: 2025 Chevrolet Equinox	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name: Westgate Resorts Ltd	<input checked="" type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt: Westgate Resorts Las Vegas	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

Additional Page for Part 1

Creditor's name:	Texas Trust Credit Union	<input checked="" type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt:	2017 Jaguar F-Pace R-Sport	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
		<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name:	NewRez	<input type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt:	Single Family Residence 4308 Henderson Ave. North Richland Hills, TX 76180	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
		<input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	
Creditor's name:	GM Financial	<input checked="" type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt:	2024 Cadillac	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
		<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
		<input type="checkbox"/> Retain the property and [explain]:	

Debtor 1
Debtor 2

**James
Melissa**

First Name

**Darrell
Pat**

Middle Name

**Oneal
Oneal**

Last Name

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name: Marlin Leasing dba PEAC Solutions

☒ No

☐ Yes

Description of leased property: Office Space

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Lessor's name:

☐ No

☐ Yes

Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ James Darrell Oneal

Signature of Debtor 1

X /s/ Melissa Pat Oneal

Signature of Debtor 2

Date 01/27/2025

MM/ DD/ YYYY

Date 01/27/2025

MM/ DD/ YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Northern District of Texas

In re Oneal, James Darrell

Oneal, Melissa Pat

Case No. _____

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept **\$3,082.00**

Prior to the filing of this statement I have received **\$82.00**

Balance Due **\$3,000.00**

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/27/2025

Date

/s/ Marcus Leinart

Marcus Leinart

Signature of Attorney

Bar Number: 00794156

Leinart Law Firm

10670 N Central Expy Ste 320

Dallas, TX 75231-2173

Phone: (469) 232-3328

Leinart Law Firm

Name of law firm

Date: **01/27/2025**

/s/ James Darrell Oneal

James Darrell Oneal

/s/ Melissa Pat Oneal

Melissa Pat Oneal

Fill in this information to identify your case:

Debtor 1	<u>James</u>	<u>Darrell</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Melissa</u>	<u>Pat</u>	<u>Oneal</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Northern District of Texas</u>		
Case number (if known)	<u></u>		

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A-1**Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income1. **What is your marital and filing status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse												
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<u>\$0.00</u>	<u>\$0.00</u>												
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<u>\$0.00</u>	<u>\$0.00</u>												
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<u>\$0.00</u>	<u>\$0.00</u>												
5. Net income from operating a business, profession, or farm	<table border="0"> <tr> <td></td> <td>Debtor 1</td> <td>Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td><u>\$0.00</u></td> <td><u>\$394.33</u></td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>- <u>\$0.00</u></td> <td>- <u>\$0.00</u></td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td><u>\$0.00</u></td> <td><u>\$394.33</u></td> </tr> </table>		Debtor 1	Debtor 2	Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$394.33</u>	Ordinary and necessary operating expenses	- <u>\$0.00</u>	- <u>\$0.00</u>	Net monthly income from a business, profession, or farm	<u>\$0.00</u>	<u>\$394.33</u>	<div>Copy here →</div> <u>\$0.00</u> <div><u>\$394.33</u></div>
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$394.33</u>												
Ordinary and necessary operating expenses	- <u>\$0.00</u>	- <u>\$0.00</u>												
Net monthly income from a business, profession, or farm	<u>\$0.00</u>	<u>\$394.33</u>												
6. Net income from rental and other real property	<table border="0"> <tr> <td></td> <td>Debtor 1</td> <td>Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td><u>\$0.00</u></td> <td><u>\$0.00</u></td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>- <u>\$0.00</u></td> <td>- <u>\$0.00</u></td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td><u>\$0.00</u></td> <td><u>\$0.00</u></td> </tr> </table>		Debtor 1	Debtor 2	Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$0.00</u>	Ordinary and necessary operating expenses	- <u>\$0.00</u>	- <u>\$0.00</u>	Net monthly income from rental or other real property	<u>\$0.00</u>	<u>\$0.00</u>	<div>Copy here →</div> <u>\$0.00</u> <div><u>\$0.00</u></div>
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	<u>\$0.00</u>	<u>\$0.00</u>												
Ordinary and necessary operating expenses	- <u>\$0.00</u>	- <u>\$0.00</u>												
Net monthly income from rental or other real property	<u>\$0.00</u>	<u>\$0.00</u>												
7. Interest, dividends, and royalties	<u>\$0.00</u>	<u>\$0.00</u>												

James Darrell Oneal
Melissa Pat Oneal
First Name Middle Name Last Name

Case number (if known) _____

Column A
Debtor 1
Column B
Debtor 2 or
non-filing spouse

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: _____ ↓

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

US Personnel Mgmt-Retirement

\$2,466.00

\$0.00

Total amounts from separate pages, if any.

+ _____

+ _____

\$2,466.00

+ \$394.33

= \$2,860.33

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Total current
monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here →

\$2,860.33

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b.

\$34,323.96

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Texas

Fill in the number of people in your household.

2

Fill in the median family income for your state and size of household..... 13.

\$80,658.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Debtor 1
Debtor 2

James
Melissa
First Name
Darrell
Pat
Middle Name
Oneal
Oneal
Last Name

Case number (if known) _____

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ James Darrell Oneal

Signature of Debtor 1

Date 01/27/2025
MM/ DD/ YYYY

X /s/ Melissa Pat Oneal

Signature of Debtor 2

Date 01/27/2025
MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A–2.

If you checked line 14b, fill out Form 122A–2 and file it with this form.

IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

IN RE: **Oneal, James Darrell**
Oneal, Melissa Pat

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 01/27/2025 Signature /s/ James Darrell Oneal
James Darrell Oneal, Debtor

Date 01/27/2025 Signature /s/ Melissa Pat Oneal
Melissa Pat Oneal, Joint Debtor

Advanced Recovery Systems
PO Box 321472
Flowood, MS 39232

Affirm, Inc.
Attn: Bankruptcy Attn: Bankruptcy
650 California St , Fl 12
San Francisco, CA 94108-2716

Amex
Correspondence/Bankruptcy
PO Box 981535
El Paso, TX 79998-1535

An/goodwin
2425 North Central Expressway Ste. 500
Richardson, TX 75080

Bank of America
Attn: Bankruptcy 4909 Savarese Circle
Tampa, FL 33634

Bank of America
Attn: Bankruptcy NC4-105-03-14 POB
26012
Greensboro, NC 27410

Bank Of America
Attn: Bankruptcy 100 North Tryon St
Charlotte, NC 28255

Barclays Bank Delaware
Attn: Bankruptcy
PO Box 8801
Wilmington, DE 19899-8801

Caine & Weiner

Attn: Bankruptcy 5805 Sepulveda Blvd
4th Floor
Sherman Oaks, CA 91411

Capital One

Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130-0285

Cenlar

Attn: Centralized Bankruptcy 425 Phillips
Blvd.
Ewing, NH 08618

Century Law Firm

301 W. Bay St. Ste. 1465
Jacksonville, FL 32202

Chase Auto Finance

Attn: Bankruptcy 700 Kansas Lane LA
Monroe, LA 71203

CIG Financial

Attn: Bankruptcy
PO Box 19795
Irvine, CA 92623

Citibank/Sears

Citicorp Cr Srvs/Centralized Bankruptcy
PO Box 790040
St Louis, MO 63179-0040

Citibank/The Home Depot

Citicorp Cr Srvs/Centralized Bankruptcy
PO Box 790040
St Louis, MO 63179-0040

Click n' Close

15301 Spectrum Drive #405
Addison, TX 75001

Collection Management
Company

Attn: Bankruptcy Attn: Bankruptcy
661 Andersen Drive , Suite 110
Pittsburgh, PA 15220

Comenity Bank/Bealls

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenity Bank/Justice

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenity Bank/Overstock

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenity Capital Bank/HSN

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenity Capital/Davids
Bridal

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Comenitybank/New York

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

ComenityBank/Venus

Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218

Costco Business Citi

PO Box 78019
Phoenix, AZ 85062

Discover Financial

Attn: Bankruptcy
PO Box 3025
New Albany, OH 43054

EECU

Attn: Bankruptcy
PO Box 1777
Fort Worth, TX 76101

Fifth Gear Argyle

8955 US 377
Argyle, TX 76226

Flagship Credit Acceptance

Attn: Bankruptcy
PO Box 965
Chadds Ford, PA 19317

Fst Premier

3820 N Louise Ave
Sioux Falls, SD 57107

GM Financial

801 Cherry Street, Ste. 3600
Fort Worth, TX 76102

GM Financial
801 Cherry St Ste 3600
Fort Worth, TX 76102-6855

Greensky Llc
Attn: Bankruptcy Attn: Bankruptcy
5565 Glenridge Connector , Ste 800
Atlanta, GA 30341-4796

Harris & Harris
111 W Jackson Blvd Suite 400
Chicago, IL 60604

Jpmcb
MailCode LA4-7100 700 Kansas Lane
Monroe, LA 71203

Kinecta Federal Credit Union
Attn: Bankruptcy Dept
P.O. Box 10003
Manhattan Beach, CA 90266

Kinecta Federal Credit Union
Attn: Bankruptcy
PO Box 10003
Manhattan Beach, CA 90266

Kohl's
Attn: Credit Administrator
PO Box 3043
Milwaukee, WI 53201-3043

LoanCare Llc
Attn: Bankruptcy
PO Box 8068, VA 23452

LVNV/Resurgent Capital
Services
PO Box 10587
Greenville, SC 29603-0587

Macy's/ DSNB
Attn: Bankruptcy 701 E. 60th Street
North
Sioux Falls, SD 57104

Marlin Leasing dba PEAC
Solutions
300 Fellowship Road
Mount Laurel, NJ 08054

Mrc/united Wholesale M
Attn: Bankruptcy P. O. Box 619098
Dallas, TX 75261-9741

NAVY FCU
Attn: Bankruptcy
PO Box 3000
Merrifield, VA 22119-3000

Nebraska Furniture Mart
Attn: Collections
PO Box 2335
Omaha, NE 68103

NewRez
Attn: Research/Bankruptcy
PO Box 5452
Mount Laurel, NJ 08054-5452

NewRez
Attn: Bankruptcy
PO Box 10826
Greenville, SC 29603-0826

NTTA
PO Box 660244
Dallas, TX 75266-0244

James Darrell Oneal
4308 Henderson Ave.
North Richland Hills, TX 76180

PEAC Solutions
c/o Karen Shields, Esquire
300 Fellowship Road
Mount Laurel, NJ 08054

Planet Home Lending, L
10 Research Pkwy
Wallingford, CT 06492

Progressive County Mutual
Insurance
16955 Space Center Blvd
Houston, TX 77062

Santander Consumer USA, Inc
Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161-1245

Seventh Ave/Swiss Colony
Inc.
Attn: Bankruptcy 1112 7th Ave
Monroe, WI 53566

Small Business
Administration
409 3rd St. SW
Washington, DC 20416

Sunbit Financial

Attn: Bankruptcy 10880 Wilshire Blv Suite
870
Los Angeles, CA 90024

Syncb/At Home CC

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Syncb/Rooms To Go

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Syncb/Walmart

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Synchrony Bank

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Synchrony Bank/Care Credit

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Synchrony Bank/Lowes

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Synchrony Bank/Men's
Wearhouse

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Synchrony Bank/Sams

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Synchrony/Ashley Furniture
Homestore

Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896-5060

Synchrony/PayPal Credit

Attn: Bankruptcy
PO Box 965064
Orlando, FL 32896-5064

TD Auto Finance

Attn: Bankruptcy
PO Box 9223
Farmington Hills, MI 48333-9223

TD Bank

Attn: Bankruptcy/TD Card Svcs
PO Box 84037
Columbus, GA 31908-4037

Texas Trust Credit Union

Attn: Bankruptcy
PO Box 2260
Mansfield, TX 76063-0047

Together Credit Union

Attn: Bankruptcy 423 Lynch St.
St. Louis, MO 63118

Toyota Financial Services

Attn: Bankruptcy
PO Box 259004
Plano, TX 75025-9001

Trajector Medical
5950 NW 1st Place Ste. 200
Gainesville, FL 32607

Us Bk Cacs
Attn: Bankruptcy
PO Box 5229
Cincinnati, OH 45201-5229

USAA Federal Savings Bank
Attn: Bankruptcy 9800 Fredericksburg Rd
San Antonio, TX 78288

USAA Federal Savings Bank
Attn: Bankruptcy 9800 Fredericksburg
Road
San Antonio, TX 78288

UT Southwestern Medical
PO Box 845347
Dallas, TX 75284-5347

Village Capital & Investments,
Llc
Attn: Bankruptcy Attn: Bankruptcy
2550 Paseo Verde Parkway , Suite 100
Henderson, NV 89074

Wells Fargo Bank NA
Attn: Bankruptcy 1 Home Campus MAC
X2303-01A 3rd Floor
Des Moines, IA 50328

Wells Fargo Bank, NA
Attn: Bankruptcy 1 Home Campus MAC
X2303-01A 3rd Floor
Des Moines, IA 50328

Wells Fargo Jewelry
Advantage
Attn: Bankruptcy POB 10438 MAC
F8235-02F
Des Moines, IA 50306

Westgate Resorts Ltd
Attn: Bankruptcy 5601 Windhover Dr.
Orlando, FL 32819